## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10606680

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			22				1	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00		BASIC FEE	750.00
					* 2				070.00	ОН		<del></del>
TOTAL CHARGEABLE CLAIMS			த் <u>த</u> minus 20=		* 32			X\$ 9=	7.5	OR	X\$18=	36
INDEPENDENT CLAIMS			√ minus 3 =		1			X42=	4.	OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							İ	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL	*	OR	TOTAL	870
CLAIMS AS AMENDED - PART II											OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	, X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MI	JUIPLE DEF	ENDEN	CLAIM		1	+140=		OR	+280=	
	P				2.		,	TOTAL		l	TOTAL	
		(0-1						ADDIT. FEE		OR	ADDIT. FEE	
Г		(Column 1) CLAIMS	305 35	(Colui HIGH		(Column 3)	1 1		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	•	=	]	X\$ 9=	i.	OR	X\$18=	
	Independent	*	Minus	***		]=	]	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	JUTIPLE DEF	ENDEN	CLAIM		<u>ا</u> ا	+140=	Process of the state of the sta	OR	+280=	
			1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE					
		(Column 1)	(Column 3)	•		in search	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	,	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=	<u> </u>		X84=	ļ
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		]	776-	<u> </u>	OR	704=	
+140=										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		mber Previously P ther Previously Pa							ronriate bo			